

LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.



Lobbyist Registration Number



FOR OFFICE USE ONLY

Postmark Date: 11/21/04

REG
V# 0009258795
\$110 PKS
11/21/04

11/21/04

1. NAME Canuteson Elizabeth A.
Last First MI

2. BUSINESS PHONE 913-315-9297
Area Code and Phone Number

3. BUSINESS ADDRESS 6450 Sprint Parkway, MS: KSOPHN0212-2A450
Street and No. City State Zip

Same
MAILING ADDRESS Overland Park, KS 66251
Street and No. City State Zip

4. EMPLOYER Sprint

5. EMPLOYER'S ADDRESS Same
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name Sprint

Address 6450 Sprint Parkway Overland Park, KS 66251

Business or purpose telecommunications

Does this person pay you? yes

If No, who pays you? _____

LOBBYING REGISTRATION FORM



2. Name _____

Address _____

Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

3. Name _____

Address _____

Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

4. Name _____

Address _____

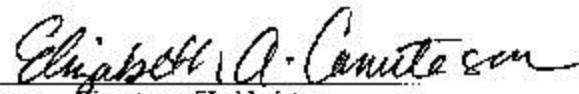
Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.


Signature of Lobbyist

ATTACH

